

PART B - FEE(S) TRANSMITTAL

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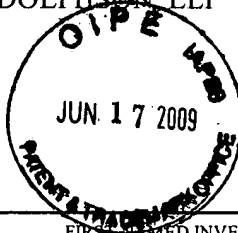
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4955 7590 04/06/2009

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06/17/2009 CCHAU2 00000090 10781041

01 FC:1501 1510.00 OP
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Marie E. Forte (Depositor's name)
 Marie E. Forte (Signature)
 June 15, 2009 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/781,041

02/17/2004

Haifeng Wang

944-005.025

8368

TITLE OF INVENTION: OFDM TRANSCEIVER STRUCTURE WITH TIME-DOMAIN SCRAMBLING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	07/06/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
DEPPE, BETSY LEE	2611	375-260000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Ware, Fressola, Van Der
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

NOKIA SIEMENS NETWORKS OY

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ESPOO, FINLAND

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

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- ☒ A check is enclosed.
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☒ The Director is hereby authorized to charge the applicant fee(s) any deficiency, or credit any overpayment, to Deposit Account Number 23-0442 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Kenneth Q. Lao

Date June 15, 2009

Typed or printed name Kenneth Q. Lao

Registration No. 40,061

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